

POSITION	ID NO.	DATE
CLASSIFIER	05	2/4
EXAMINER	Q53	2/25
TYPIST	Q60	2/10/97
VERIFIER		
CORPS CORR.		
SPEC. HAND	35	2/1/97
FILE MAINT.	Q53	2/27
DRAFTING		

INDEX OF CLAIMS

Claim	Final	Original	Date
1	1	1	10/27/96
2	2	2	10/27/96
3	3	3	10/27/96
4	4	4	10/27/96
5	5	5	10/27/96
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7	7	7	10/27/96
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SYMBOLS

✓	Rejected
=	Allowed
- (Through number)	Cancelled
+	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date
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